

John Flynn SJFlynn@afphq.org> on 10/07/2010 08:40:49 PM

To:

""2022190174@fec.gov"" <2022190174@fec.gov>

cc:

Subject: FEC Form 9

Attached please find the FEC Form 9 filed on behalf of Americans for Prosperity.

Regards,

John

John Flynn
Executive Vice President and General Counsel
Americans for Prosperity
Suite 350
2111 Wilson Blvd.
Arlington, VA 22201
(703) 224-3200 office
(703) 224-3201 facsimile
jflynn@afphq.org
www.AmericansForProsperity.org



FEC Form 9 - 10-7-10.pdf

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Person Making the Distrursements/Obligation	ons				
(a) Name Americans for Prospe	nity				
(b) Address (number and street) Check if different 2111 Will Son Blud Suite 3	than dieviously reported 2. FEC Identification Number				
(c) City State and ZIP Code Arrivation VA 22201	C				
(d) Name of Employer or Principal Place of Business	(e) Occupation				
X New	09 30 2010				
3. Is This Statement or	4. Covering Period through				
Amended	10 07 2010				
5. (a) Date of Public Distribution(s) 70 06					
6. The filer is a(n): (a) Individual (b) Unincorporated Organization (c) Qualified Nonprofit Corporation (11 CFR 114.10)					
(d) X Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15					
(e) Other, specify::					
7. If the filter is an individual unbecomested	organization or qualified nonprofit corporation, Yes No				
were the disbursements made exclusively	from donations to a segregated bank account?				
8. Custodian of Records					
(a) Name Steve Mullins					
(b) Address (number and street) 2.11 Wilson Blud, Suite 350 (c) City State and 719 Code.					
Arlington, VA 22201					
	1. L				
Americans for Prosper	49 40				
9. Total Donations This Statement	,				
10. Total Disbursements/Obligations This Stat	lement 172,234,00				
Under penalty of perjury, I certify that this statement is true, correct and complete.					
TYPE OR PRINT NAME OF PERSON COMPLETING FORM JUN TUNN					
SIGNATURE SELECTION	DATE 10/7/10				
NOTE Submission of lalse, erronaous or incumplete in	offermation may subject the person signing this statement to the penalties of 2 U.S.C. §437g.				

ers	on(s) Sharing/Exercising Control	Morrowers of the second of the			
١.	(a) Name Tim Phillips				
,	(b) Address (number and street) 211 Wilson Blud, Suite 350	e de la companio del companio de la companio de la companio del companio de la companio del companio de la companio de la companio de la companio de la companio del companio de la companio della compan			
	Arlington, VA 22201				
•	(d) Name of Employer or Principal Place of Business AWRIC CAN S FOR PRISOLETY	(e) Occupation Pro Si Jent			
Э.	(a) Name John Punn				
	(b) Address (number and street) Son Blud, Svik 350	<u> </u>			
	(c) City. State and ZP Code ATIMITON, VA 27201				
	(d) Name of Employer a Principal Place of Business AMUN Can Stor Prosperity	Secretary Treasures			
C.	(a) Name Steine Mulling	//			
	(b) Address (number and street) Son Byd, Swite 35	<u> </u>			
	(c) City, State and ZIP Code AT Moton, VA: 22201				
	(d) Name of Employer of Principal Flace of Business AMERICANS for Prespectity	(e) Occupation			
D.	(a) Name				
	(b) Address (number and street)	3,100,000			
	(c) City, State and ZIP Code				
	(d) Name of Employer or Principal Place of Business	(e) Occupation			
E.	(a) Name				
	(b) Address (number and street)				
:	(c) City; State and ZIP Code				
	(d) Name of Employer or Principal Place of Business	(e) Occupation			

SCHEDULE 9-A Donation(s) Received

PAGES OF

A.	Full Name of Donor			Date of Receipt
	Meiling Address of Donor	Annual de la constitución de la		Amount
	City	State	Zip	v .
В.	Full Name of Donor			Date of Receipt
,	Mailing Address of Donor	e gang gane <u>""</u> aa	:	Amount
	City	State	Zip	
C.	Full Name of Donor		rus ^{titi} ususus s	Date of Receipt
	Mailing Address of Donor	<u> </u>	· · · · · · · · · · · · · · · · · · ·	Amount
	City	State	Zip	, ,
D.	Full Name of Donor			Date of Receipt
	Mailing Address of Donor	i ili mananani manina mani		Amount
	City	State	Zip	t
E.	Full Name of Donor	opporer i Militari e i e i e i e i e i e i e i e i e i e		Date of Receipt
	Mailing Address of Donor			Amount
	City	State	Zip	
SUBTO	OTAL of Donations This Page (option	al)	innimakin majamikulasaa .	<u> </u>
TOTAL	This Period (last page this line num (carry total from last page to Line 9		02000in.lacv	4 3 4

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee	Date of Disbursement or Obligation			
Mentzer Meelia	09 30 2010			
Malling Address of Payee				
600 Fairmount Avenue	Amount 7/L DO 2 (-7)			
City State Zip Code	74.82200			
Towson MD 21286	Communication Date			
Name of Employer Occupation	10 06 2010			
Purpose of Disbursement (Including title(s) of communication(s)) Placement of "Tov Far" TVAd				
Name of Federal Candidate Office Sought: House State: NH	Disbursement/Obligation For:			
Ann Ruster Senate District: 02	Primary General			
L) President	Other (specify)			
Name of Federal Candidate Office Soughi: House State:	Disbursement/Obligation For: ☐ Primary: ☐ General			
Senate District:	Other (specify)			
Name of Federal Candidate Office Sought House	Disbursement/Obligation For:			
State:	Primary General			
President District:	Other (specify)			
B. Full Name (Last, First, Midgle, Initial) of Payee	Date of Disbursement or Obligation			
Mentrer Media	09 30 2010			
Mailing Address of Payee	Amount			
City State Zio Code	97.412.00			
City Towson MD 2/286				
Name of Employer Occupation	Communication Date			
	10 07 2010			
Purpose of Disbursement (Including title(s) of communication(s)) Placement of "Now" TV Ad				
Name of Federal Candidate Office Sought: House State:	Disbursement/Obligation For:			
Julie Lassa - Senate District: 07	Primary General			
Name of Federal Candidate Office Sought; House	Other (specify) ▶ Disbursement/Obligation For:			
State:	Primary General			
President District:	Other (specify)			
Nove of Sadard Confidence Office South Confidence	Disbursement/Obligation For:			
State:	Primary General			
President District:	Other (specify)			
SUBTOTAL of Disbursements/Obligations This Page (optional)	,172,234.00			
TOTAL This Desired (leak page 46) line womber 1-10	172, 234,00			
TOTAL This Period (last page this line number only)				

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt **Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS** Priority Mail Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office

Date of Receipt or Postmarked Other (Specify): E-Mail_ 10/07/2010 **PREPARER** DATE PREPARED (3/2005)